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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)				Docket Number (Optional)		
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				67789-711		
Apr	Application Number 10/723,164			Filed No	ovember 26, 2003	
For	METH	ODS OF ASSESSING CROHN'S DISE	ASE PATIENT PHENOTYPE B'	Y I2, OMPC, AND	ASCA SEROLOGIC RESPONSE	
Art	Art Unit 1644			Examiner No	ora Maureen ROONEY	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):						
			<u>Fee</u>	Small Entity F		
	X	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	
		Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	
		Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
		Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
		Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
X	Applicant claims small entity status. See 37 CFR 1.27.					
<u></u>	A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached.					
		The Director has already been authorized to charge fees in this application to a Deposit Account.				
X	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0258 I have enclosed a duplicate copy of this sheet.					
	WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
	Flovido.	Steut care information and authorize	AON ON PIO-2030.			
I am the applicant/inventor.						
		L	e entire interest. See 37 CFI	R 3.71.		
		Statement under 37 C	CFR 3.73(b) is enclosed (Fo	orm PTO/SB/96	3).	
		attorney or agent of recor	rd. Registration Number	56,747		
	attorney or agent under 37 CFR 1.34.					
	Registration number if acting under 37 CFR 1.34				-b04 000 7	
		Signature	/		ober 31, 2007	
		Sean D. Sen	in	21	3-633-6800	
-		Typed or printed name			elephone Number	
NOTE	E: Signatur	es of all the inventors or assignees of record o	of the entire Interest or their representa		•	
signat	nture is requ Total o	uired, see below.				
	I Utai U	A 1017	rms are submitted.		1	

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.